



## Induction Procedure

Document Status	Final
Version:	V5.0

<b>DOCUMENT CHANGE HISTORY</b>		
Initiated by	Date	Author
HR		Sam Page, People Development and Education business Partner
Version	Date	Comments (i.e. viewed, or reviewed, amended approved by person or committee)
Draft V 1.1		Agreed
Draft V 2.1	25 <sup>th</sup> May 2011	Sent to HR Policies Group to approve
Draft V2.2	3 June 2011	Sent to SPF for Approval
Final V3.0	20 June 2011	Approved by EMT
Draft V3.1	28 July 2011	Reviewed by RSM Tenon and Head of L&D
Draft V3.2	22 August 2011	Sent to Informal EMT for Approval (minuted approval at 12 September 2011 EMT formal meeting)
V4.0		Approved
V4.1	2 Aug 2013	Sent to SPF further clarity needed
V4.2	November 2013	Updated Harri Padden
V5.0	6 December 2013	SPF approved and extension August 2013 + Aug 2016

The Trust will not tolerate unlawful discrimination on the grounds of the protected characteristics of: age, disability, gender reassignment, race, religion/belief, gender, sexual orientation, marriage/civil partnership, pregnancy/maternity. The Trust will not tolerate unfair discrimination on the basis of spent criminal convictions, Trade Union membership or non-membership. In addition, the Trust will have due regard to advancing equality of opportunity between people from different groups and foster good relations between people from different groups.

Names and roles of contributors, user engagement etc.	
Document Reference	NHSLA – Relevant to standard 2 Criterion 1, 2 and 3 Relevant Strategic Objective: 2 – To have a workforce that has the skills to lead and deliver change, create flexibility and create a learning environment Directorate: Workforce and OD CQC – Outcome 14 Supporting Workers Quality Assurance Framework (refer to specific title)
Recommended at Date	SPF 3 June 2011
Approved at Date	Executive Management Team 22 August 2011
Review date of approved document	August 2016
Equality Impact Assessment	September 2013
Linked procedural documents	<ul style="list-style-type: none"> <li>• The Management of Health and Safety at Work Regulations</li> </ul>

	1999; <ul style="list-style-type: none"> <li>• Personal Development Review ;</li> <li>• Equal Opportunities ;</li> <li>• Dignity at Work ;</li> <li>• Disciplinary (Managing Staff Conduct and Performance Procedure);</li> <li>• Business Travel ;</li> <li>• Community First Responder Policy and Procedures;</li> <li>• Managing the Use of Agency Workers ;</li> <li>• Patient Transport Services new starter Handbook;</li> <li>• Learning and Development ;</li> <li>• Managing Sickness Absence</li> </ul>
Dissemination requirements	All managers and employees, via email and intranet Public- To be published on the Trust's website

## Contents

- 1.0 Introduction
- 2.0 Purpose
- 3.0 Duties
- 4.0 Definition: The Induction Process
- 5.0 Corporate Induction
- 6.0 The Corporate Induction Procedure
- 7.0 Local Induction
- 8.0 Induction Roles and Responsibility
- 9.0 Trust Employee Local Induction Procedure
- 10.0 Procedure Review

Please note employees who undergo training in a different location to their operational work place will need to complete **two sets of local induction checklists**. One to cover the period in training school and the other to cover their operational role. Both sets must be sent by the employee to the PDE on completion. If you are unsure which induction checklist to use, please contact the PDE. In some instances managers could choose to amend the checklist to suit the type of employee/bank worker concerned.

## Appendices

- Appendix A** Local Induction Checklist to be used by all new non-clinical employees on first day of employment and all new clinical employees on first day of commencing operational role (i.e. after completing clinical training).
- Appendix B** Local Induction Checklist for all new permanent clinical employees undergoing a period of training before commencing an operational role.
- Appendix C** Local Induction Checklist for all agency/temporary workers.
- Appendix D** Equality Impact Assessment.

## 1. Introduction

As part of the Trust's ongoing commitment to the development, training and education of all our employees, the Trust is committed to ensuring all new employees and volunteers (i.e. Community First Responders, Patient Transport Service Car Drivers and senior clinicians who volunteer for major incidents) have an effective and worthwhile induction. The objectives of Induction are:-

- To help every new employee, agency worker, bank worker and volunteer adjust to their new working environment and to enable them to perform effectively as quickly and safely as possible;
- To ensure the Trust meets its legal obligations with particular regard to health and safety regulation, such as Health and Safety at Work Act 1974 and the Management of Health and Safety at Work Regulations 1999;
- To meet the requirements of the NHS Litigation Authority (NHSLA) Risk Management Standards;
- To provide a supportive environment and positive corporate image;
- To help define performance expectations, maintain motivation and foster good working practices;

This Procedure has been written in partnership by Management and Staff side.

## 2. Purpose

This Procedure applies to all new permanent employees, bank workers, employees transferred in by TUPE and fixed term contract staff employed/engaged by the Trust as well as volunteers, bank workers and agency/temporary workers.

Under the Health and Safety at Work Act, individual employees are responsible for ensuring that they undertake their duties in a safe manner without endangering themselves, other employees or patients.

Non-compliance with this Procedure may lead to further action, which for Trust employees (both employees and managers) may include formal disciplinary action.

The Trust's induction consists of two elements:-

- A) Corporate Induction;
- B) Local Induction.

It is a mandatory requirement that all new Trust employees must attend the Corporate Induction (within their first six months).

Local induction is mandatory for anyone working within the Trust.

All employees are entitled to access this Procedure which is located in the HR Policies and Procedures Folders and/or on the Trust's intranet. However, if this Procedure is required in any other format please seek guidance from the Human Resources Department, management or trade union representative.

### **3. Duties**

#### **3.1 Human Resources Department**

Human Resources Department is responsible for keeping the provisions within this Procedure in line with employment legislation and best practice people management principles.

#### **3.2 Managers, HR and Trade Union Representatives**

Managers, HR Staff and Trade Union Representatives are responsible for providing advice and guidance to employees on the application of this Procedure and procedure and for bringing any mutual beneficial improvements to this Procedure to the attention of the Trust.

#### **3.3 Employees**

The new employee (permanent/bank worker/staff transferred in via TUPE/fixed term contract holder) is responsible for attending and actively participating in the Corporate Induction, within the first six months of employment.

### **4. Definitions: The Induction Process**

The objective of the Trust's Induction process is to officially welcome the member of staff to the Trust and to introduce other mandatory and essential topics. The minimum content of the process will include:-

Corporate Induction:

- Understanding the Trust's Values and Expectations
- Understanding the Ambulance Service and Trust strategy.
- Equality, Diversity and Human Rights
- Risk Management
- Information Governance
- Trade Union involvement
- Fraud and Counter Security
- Health and Wellbeing
- Health and Safety
- Understanding the structure of the NHS

Local Induction:

- Customer Service
- Fire Safety
- Human Resources (including staff support mechanisms) and Staff Communications
- Manual Handling
- Patient, Public Involvement (PPI)
- Adult and Child protection
- Emergency Planning & Preparedness (Civil Contingencies Act)
- NHS Complaints Procedure
- Personal Development Reviews (PDR) and the Knowledge and Skills Framework (KSF)
- Infection Prevention and Control including Hand Hygiene
- IM&T
- Data Quality

This list is not exhaustive and may be subject to change. Please refer to the Mandatory Training Matrix (Learning and Development Procedure), the Trust's training prospectus

(available on East24) and the Local Induction Checklists (Appendices A, B and C).

Community First Responders (CFR) have a set three day induction programme. There are two levels of First Responder (Community First Responder (CFR) and Co-Responder). The minimum content of the process will include:

Training for CFR will be approximately 18 hours and cover the following subjects:-

- Cardiopulmonary resuscitation (CPR)
- Management of patient in respiratory/cardiac arrest
- Use of AED (Automated External Defibrillator)
- Oxygen administration
- Management of choking patient, unconscious patient and fitting patient
- Recovery position
- Safety procedures
- Use of all equipment in the First Responder Kit

Responders also receive instruction in:-

- Patient and scene management
- How to respond to a call using mobile and pager
- How to report untoward incidents or unusual occurrences
- How to fill out a Trust Incident Report Form (IRF)
- Providing verbal hand-over to ambulance crew
- Personal safety including cross-infection control
- Awareness of Manual Handling
- Consent, confidentiality and right of entry

In addition to the above Co-Responders will receive a further 2 days training in trauma covering the following subjects:-

- Mechanisms of Injury
- Trauma Primary Survey
- Secondary survey
- Simple management of fractures
- A greater in depth knowledge of:
  - Burns, Drowning, Airway management, Ventilation, the effects of haemorrhage
  - More advanced trauma management including assisting crews with long boards and extrication

Non Emergency Services volunteer car drivers have a new starter handbook

Any clinician who is registered with the Trust as a volunteer, to assist when there is a major incident, will receive a new starter handbook for reference and local induction. A register will be kept of these individuals by Trusts Air Operations Manager/Critical Care lead and it is their responsibility to co-ordinate and monitor compliance of local induction.

The Learning and Development Administrator will co-ordinate the Induction process on behalf of the Learning and Development Unit (PDE).

The PDE will monitor compliance of the Induction process and report monthly in the Corporate Dashboard.

## **5. Corporate Induction**

Corporate Induction refers to activities which help a new employee get to know and understand the organisation they have joined. It is mandatory for all new employees to attend the Corporate Induction within their first six months of employment.

Agency/temporary workers do not need to attend the Corporate Induction.

Volunteers will be invited to the Corporate Induction but it is not compulsory for them to attend.

All new clinical staff commence their employment with the Trust in the clinical training department. The delivery of their corporate induction is undertaken during their first week in training. Therefore, there is no requirement for a booking process for these employees.

Anyone failing to attend and employed for more than six months who has not attended a Corporate Induction programme will be reported to Head of People Development and Education who will report this formally to Associate Directors/Head of Departments with all relevant information of non attendance.

The Head of People Development and Education will take those reports to the Executive Leadership Team meeting once a month for review by the Associate Directors, who can follow up non-compliance with the individual line manager.

On a quarterly basis, the Director of HR and OD will report to the Trust Board of any member of staff who has not attended Corporate Induction, without good reason, within the first six months of their employment with the Trust. Non-compliance within specific teams/departments can then be followed up by the relevant director.

## **6. The Corporate Induction Procedure**

The Trust will run a one day operational corporate induction programme in the first week of each new clinical training course at the appropriate venues. Attendance will be mandatory for all new operational employees.

The Trust will run a one day non-operational corporate induction programme for all new non-operational starters. Dates will be offered throughout the year at all main sector offices with attendance being mandatory.

Employees can attend the corporate induction in their own locality or at a neighbouring locality. Any travel expenses incurred by Trust employees travelling to the Induction can be reclaimed in accordance with the Trust's Business Travel Procedure. It is anticipated that non-operational employees should be able to attend their Corporate Induction within six months of starting employment. Operational employees will attend in the first week of their core clinical training programme. All Trust employees will be paid to attend the Corporate Induction programme. It may be necessary for some employees to attend outside of their normal contracted hours. This will be recompensed according to the Agenda for Change NHS Terms and Conditions of Service Handbook. Volunteers will not be paid to attend the course and will need to travel to the venue at their own expense.

Each Corporate Induction Programme will have a named facilitator whose role will be to ensure that the programme is delivered in line with this Procedure, as well as delivering aspects of the programme. The facilitator will record the attendance on a paper register and provide this information to the Workforce and OD Administrator.

At the end of the programme, evaluation feedback will be gained from the participants to ensure it meets employees' needs and expectations. That feedback will be viewed by the PDE and circulated to all the presenters. The full content of the programme will be reviewed annually by the PDE.

The Trust will monitor the reasons for non-attendance of the Corporate Induction, to ensure that no particular staff groups are at a disadvantage. If it is found that attending the programme is difficult for some staff groups, such as part-time employees, those with child care/carer responsibilities etc. then the Trust will offer suitable alternatives.

## **7. Local Induction**

Local Induction refers to the various times range of activities which ensure any new individual working for, or on behalf of the Trust, is given all the essential information deemed necessary for their familiarisation with internal Trust processes and procedures and mandatory training.

**Local Induction Checklist** – This is a list of topics/activities which must be completed by the employee/volunteer/temporary worker during their induction period (please see Appendices A, B and C).

## **8. Induction Roles and Responsibilities**

### **8.1 Line Managers**

Line managers are responsible for ensuring that local and corporate inductions have been completed in the identified time frames.

Line managers are responsible for signing off the local induction checklists for all their new employees. Line managers employing agency/temporary workers have the responsibility to sign off the Local Induction checklist for agency/temporary workers (Appendix C) with the worker on the first day of employment in the full knowledge that it has been conducted comprehensively and to a high standard.

Line managers must send a copy of the completed local induction checklist to the PDE for audit purposes.

### **8.2 New Employees**

It is mandatory for all new employees (permanent, employees transferred in by TUPE, bank workers and those on fixed term contracts) to sign off (with their line manager) their completed local induction checklist (see Appendix A or B) within three months of starting employment.

Permanent employees must send a copy of the completed induction checklist to the Learning and Development Administrator for audit purposes.

Operational employees who undergo training in a different location to their operational work place will need to complete two local induction checklists. One during their first week of training and the other when they begin their operational role. Both must be sent to the PDE on completion once they have been signed.

### **8.3 Human Resources Service Team**

Once a quarter, the Human Resources Services Team are responsible for notifying the PDE of all agency and temporary workers and the line manager accountable for their induction.

The Human Resources Services Team or the line manager will be responsible for notifying the new starter where, when and with whom they need to meet on their first day.

#### **8.4 Community Partnership Manager (CPM)**

Community Partnership Managers are responsible for ensuring all Community First Responders (CFR) attend the mandatory three day CFR training/ local induction course and Corporate Induction Programme.

CPMs must send confirmation of CFR's attendance at all three days of this course to the CFR Administrator.

CPMs in partnership with service delivery leads are responsible for action planning where non-compliance has been recorded and reported, although no responders will be activated to undertake duties on behalf of the Trust until the 3 days local induction have been completed and signed off at the required level.

All CFRs will be invited onto the Trust's Corporate Induction and will also have access to the slides and handouts that are made available on the Corporate Induction

#### **8.5 Community First Responder Administrator**

The CFR Administrator will enter compliance into the CPR training database and must as a minimum report on this compliance every quarter to the PDE.

If the CFR Administrator does not receive a signed copy of the CFR three day induction register within one month of the start date of the activity, they are responsible for writing to the relevant CPM asking for a copy to be returned immediately.

If the CFR Administrator does not receive a signed copy of the CFR three day induction register within three months of the start date of the activity, they are responsible for writing to the Associate Director of Health and Emergency Operations and the CPM notifying them that non-compliance has been recorded. The CPM will then be responsible for taking action.

#### **8.6 Non Emergency Services**

Patient Transport Services (PTS) Managers have the responsibility of ensuring that Volunteer Car Drivers read the Ambulance Car Service Operational Handbook and any other additional induction material on their first day of volunteering.

PTS Managers are also required to ensure that volunteers signs a document to confirm they have received the Ambulance Car Service Operational Handbook.

PTS Managers are responsible for ensuring that the volunteer has sent the document to the local PTS Volunteer Co-ordinator.

#### **8.7 PTS Volunteer Co-ordinators**

NES Volunteer Co-ordinators have the responsibility of ensuring volunteer car drivers are invited to attend a Corporate Induction programme.

PTS Volunteer Co-coordinators are responsible for entering compliance onto a database and must, as a minimum, report on this compliance every quarter to the PDE.



If the PTS Volunteer Co-ordinator has not received a signed receipt from the volunteer that they have read and understood their handbook, within one month of starting voluntary work, they are responsible for writing to the relevant PTS manager to chase the document.

If the PTS Volunteer Co-ordinator has not received a signed receipt from the volunteer that they have read and understood their handbook within two months of starting voluntary work, they will be required to write to the PTS General Manager for further action.

## **8.8 Volunteers**

Volunteer Car Drivers must read the Ambulance Car Service Operational Handbook and any other additional induction material on their first day of volunteering.

Volunteers are required to sign a document to confirm they have received the Ambulance Car Service Operational Handbook and send it to the PTS Volunteer Coordinator.

## **8.9 The PDE**

The PDE is responsible for maintaining all records of Trust employees related to local induction on the OLM system and run appropriate reports to identify compliance against the local induction procedure within this Procedure.

If 3 months and 2 weeks after an individual has started, the PDE has not received the local induction checklist; they are responsible for writing to the employee, copied to the line manager, chasing the checklist.

If 4 months after the individual has started, the PDE has not received the local induction checklist; they will be responsible for writing again to the employee, copied to the line manager, chasing the checklist.

If 4 months and 2 weeks after the individual has started, the PDE has not received the local induction checklist; the PDE will be required to contact the appropriate General Manager for further action.

## **8.10 All Existing Employees**

All employees are expected to welcome new employees to the organisation and support them in their local induction.

## **9. Trust Employee Local Induction Procedure**

Line managers/Course facilitators should download a copy of the Local Induction Checklist (see Appendix A or B) before the new employee starts and begin to plan their local induction, including booking meetings with key colleagues for the new starter to meet. The checklist is divided into three sections:

- Information to be covered on first working day;
- Information to be covered in the first week;
- Information to be covered within 3 months/by end of clinical training course.

The Induction checklist is given to the new starter on day one. It is recognised that all employees will have individual learning needs and the checklist should be tailored to the requirements of the role and the job holder. The use of jargon and abbreviations should be avoided.

It is generally regarded as best practice that employees are allocated a buddy/mentor – a colleague who will support the new employee during their induction period, in the absence of the line manager.

It is recommended that if new employees wish to, they attend a shift on an ambulance as an observer. This is not mandatory but is felt that all employees should have some understanding of front line and NES services. This can be arranged, in consultation with their line manager. The role of the observer must be explained to the individual before the shift begins and the appropriate paperwork completed. It is also recommended that the individual visits HEOC to understand how calls are managed, however this is also optional.

Line managers/Course facilitators should be aware that the local induction checklists may be used as evidence in insurance claims, litigation, court cases and employment tribunals. They may be referred to in the event of poor performance where it is necessary to prove that appropriate initial on the job training was provided. They must be completed correctly, accurately and legibly.

New employees need training to enable them to perform satisfactorily in their role. These training needs will form part of their Personal Development Plan (PDP).

It is important for managers to appreciate that it is difficult to digest large amounts of information over a fairly short period of time. Therefore time should be regularly set aside by the manager to discuss how things are going with the individual. This gives the staff member an opportunity to raise questions or concerns and helps create a supportive environment.

## **10. Procedure Review**

The PDE will review the Induction Checklist and the Corporate Induction programme content on an annual basis to ensure they are effective, compliant and up to date. This review will also incorporate the Annual Mandatory Training Review (see Learning and Development Procedure).

# APPENDIX A print

Your Name	
Job Title	
Payroll Number	
Department/Station	
Directorate	
Your Employment Start Date	
Your Line Manager's Name	

**Your induction to the Trust will consist of 2 main parts:**

## 1. LOCAL INDUCTION

Using this checklist

You and your line manager should use the attached checklist (pages 11-17) to help you complete your local induction. The checklist is to ensure all aspects of your local induction are covered in a timely and effective manner. Only sign the information when you feel the information has been adequately covered. If an item doesn't apply to your post, please mark N.A. The checklist is not exhaustive, it should be personalised according to the requirements of the role and individual. If you feel any area has been missed, please bring it to the attention of your line manager and detail what you have completed in the last section of the checklist under "Other Specific Induction." You must complete your induction within 3 months of starting your employment with the Trust.

Once the induction is complete, you and your line manager (*or equivalent*) must sign the checklist. Take a copy of the checklist. Please send the signed completed checklist to Wendy Driscoll, Learning and Development Unit, Chelmsford Office. A copy will be placed on your personal file.

## 2. CORPORATE INDUCTION

Induction Session

All new staff are required to attend a corporate induction session. You will automatically be booked onto the next available session by the Learning and Development Unit on your arrival to the organisation. You will be sent a letter confirming the details.



**IMPORTANT NOTE:**

*Line managers are responsible for ensuring the completion of both inductions. The Local Induction must be completed within THREE MONTHS of joining and your Corporate Induction within SIX MONTHS of joining.*

# APPENDIX A

Activities to be signed off on your first working day

To be used by all new non-clinical staff on first day of employment and all new clinical staff on first day of commencing operational role (i.e. after completing clinical training).

Induction Activity	Tick to confirm achieved & detail supporting evidence if appropriate	If you have not achieved it, how will you achieve it and by when?
<b>ORIENTATION</b>		
Orientation to the department/station/office and other areas of the organisation relevant to the post		
Local Security arrangements discussed		
ID badge, uniform*, key*, access codes* issued		
Car parking, catering, locker, rest area and washroom facilities		
Introduction to colleagues and key individuals with the department/station/office		
<b>INFORMATION AND POLICIES</b>		
Explain the function and structure of department/station/office		
Confirm hours of work, breaks, cover arrangements and shift patterns if applicable		
On call and bleep arrangements*		
Issued emergency telephone numbers, given explanation of first aid procedure		
<b>HEALTH AND SAFETY</b>		
<b>Fire safety procedures and assembly points</b> <ul style="list-style-type: none"> <li>• Fire exits</li> <li>• Fire equipment</li> <li>• Fire alarms</li> <li>• Emergency telephone numbers</li> <li>• Evacuation procedures</li> </ul>		

# APPENDIX A

Activities to be signed off on your first working day \*if appropriate to role

To be used by all new non-clinical staff on first day of employment and all new clinical staff on first day of commencing operational role (i.e. after completing clinical training).

Induction Activity	Tick to confirm achieved & detail supporting evidence if appropriate	If you have not achieved it, how will you achieve it and by when?
<b>HEALTH &amp; SAFETY CONTINUED</b>		
<b>Moving and Handling procedures</b> <ul style="list-style-type: none"> <li>• Equipment</li> <li>• Procedures</li> <li>• Lifting and Handling regulations</li> </ul>		
<b>Data Protection, Freedom of Information and Caldicott</b>		
<b>Incident Reporting procedures</b> <ul style="list-style-type: none"> <li>• Nearest first aid rep</li> <li>• Location of incident forms</li> <li>• How to complete form</li> <li>• Reporting arrangements</li> </ul>		
<b>Confidentiality &amp; conduct</b> – ensuring all verbal, written & electronic information is kept and used safely		
VDU risk assessment form* completed and sent to Risk/ Occupational Health department		
Waste Disposal		
<b>OTHER</b>		
<b>Other role specific induction</b> Please detail activities continue on separate page if required		

# EAST of ENGLAND AMBULANCE SERVICE NHS TRUST

## APPENDIX A

Activities to be completed and signed off by the end of your first working week

To be used by all new non-clinical staff after first week of employment and all clinical staff after first week of commencing operational role (i.e. after completing clinical training).

Induction Activity	Tick to confirm achieved (detail supporting evidence if appropriate). If not achieved, how will you achieve it and by when?	Signature of employee & date	Signature of line manager & date
<b>COMMUNICATIONS</b>			
Explanation of key documents used and records management system.			
<b>Communication</b> <ul style="list-style-type: none"> <li>• Use of Trust intranet/ internet and email system.</li> <li>• Internal/external postal systems.</li> <li>• How to access staff communications.</li> <li>• Internal network log on and password.</li> <li>• How to access the IM&amp;T helpdesk.</li> </ul>			
<b>HEALTH AND SAFETY</b>			
Explanation of key equipment used and identification of any training requirements.			
<b>INFORMATION AND POLICIES</b>			
<b>Holidays</b> <ul style="list-style-type: none"> <li>• Explain annual leave entitlement</li> <li>• Explain process for booking annual leave</li> </ul>			
<b>Roles and Responsibilities</b> <ul style="list-style-type: none"> <li>• Introduction to buddy/ mentor.</li> <li>• The specific duties and responsibilities of the post.</li> <li>• Expectations and limitations of the post.</li> </ul>			
<b>Policies and Procedures</b> <ul style="list-style-type: none"> <li>• Made aware of all Trust policies and procedures and have either been given copies/or understand how to access them</li> </ul>			

## APPENDIX A

Activities to be completed and signed off by the end of your first working week

To be used by all new non-clinical staff after first week of employment and all new clinical staff after first week of commencing operational role (i.e. after completing clinical training).

Induction Activity	Tick to confirm achieved (detail supporting evidence if appropriate). If not achieved, how will you achieve it and by when?	Signature of employee & date	Signature of line manager & date
<p><b>Sickness/Absence</b></p> <ul style="list-style-type: none"> <li>• Reporting</li> <li>• Return to work procedure</li> <li>• Occupational health</li> <li>• How to access sources of staff help/advice/counselling/critical debriefers</li> </ul>			
<b>TRAINING AND DEVELOPMENT</b>			
<ul style="list-style-type: none"> <li>• Explain pay band progression</li> <li>• Explanation of personal development review procedure</li> <li>• Issued KSF job profile (if available)</li> <li>• Plan the date for the initial foundation gateway meeting (to be held within first month)</li> <li>• Plan a date to review induction checklist after three months</li> <li>• Date for corporate induction booked</li> <li>• Please list other mandatory training courses booked</li> </ul>			

**EAST of ENGLAND AMBULANCE SERVICE NHS TRUST**

**APPENDIX A**

Induction Activities to be completed and signed off within first three months

To be used by all new non-clinical staff after three months of employment and all clinical staff after three months of commencing operational role (i.e. after completing clinical training).

Induction Activity	Tick to confirm achieved (detail supporting evidence if appropriate). If not achieved, how will you achieve it and by when?	Signature of employee & date	Signature of line manager & date
<b>TRAINING AND DEVELOPMENT</b>			
Confirm agree a personal development plan (after one month)			
Date planned for interim review (within 6 months of starting)			
Date planned for first KSF Gateway review (after 9 months of starting)			
Has Corporate Induction been attended or date booked to attend?			
Review learning from first 3 months			
Issued KSF job profile (if not already issued and available).			
<b>OTHER</b>			
<b>OPTIONAL (non-operational staff only)</b> Been an observer on an ambulance			
<b>OPTIONAL</b> Visited HEOC			
<b>Other specific induction activities</b> Please continue on separate page if necessary			

**Both parties please sign once the entire induction checklist completed.**

Non-clinical - No later than three months after start date

Clinical staff - No later than three months after starting operational duties

**Now photocopy all pages of the Induction checklist and send to Wendy Driscoll, Learning and Development Unit, Chelmsford HQ. Make sure you keep a copy.**

I confirm I have received a full induction as described in the checklist.	
Staff member's name	.....
Staff signature	.....
Date	.....

I confirm that the person named above has satisfactorily completed their Induction programme as described in the checklist. If incomplete please include exceptions with action plan.	
Line manager's name	.....
Line manager's signature	.....
Date corporate induction completed	.....
Date local induction completed	.....



# APPENDIX A

## Your Induction - How was it for you?

This section is to be completed, in confidence by the employee only. It does not have to be seen by your line manager. It is your opportunity to feedback your thoughts on how your local and corporate induction were delivered.

Please give as detailed and frank answers as possible. Your answers are used by the Learning and Development Unit to improve the induction process for future staff.

1. What were the most useful parts of your local and corporate induction?
2. What aspects did you find least useful?
3. What else would you have liked to be have been included in your induction?
4. If the Trust could introduce three things to improve its induction process for new staff what would they be and why?
5. Any other feedback.

Thank you for taking the time to send us your feedback. Please send sheet via internal mail to Wendy Driscoll, Learning and Development Unit, C/O Chelmsford office.

### Optional

Name \_\_\_\_\_ Dept \_\_\_\_\_

Location \_\_\_\_\_

Contact number \_\_\_\_\_

Would you be happy for someone within the HR dept to contact you to discuss your comments if it is felt more information from you would be beneficial? Yes / No

# APPENDIX B please

Local Induction checklist for all new non-clinical staff and all new clinical staff on first day of commencement in permanent role

<b>Your Name</b>	
<b>Job Title</b>	
<b>Payroll Number</b>	
<b>Training Centre and course</b>	
<b>Your Employment Start Date</b>	
<b>Name of Course Director</b>	

You and the Course Director (or tutor) should use the following checklist (*pages 18-21*) help you complete your local induction whilst you are in training. The checklist is to ensure all aspects of your local induction are covered in a timely and effective manner. Only sign the information when you feel the information has been adequately covered. If an item doesn't apply to your post, please mark N.A. The checklist is not exhaustive, it should be personalised according to the requirements of the role and individual. If you feel any area has been missed, please bring it to the attention of the Course Director (*or tutor*) and detail what you have completed in the last section of the checklist under "Other Specific Induction." You must complete your induction by the end of the training course.

Once the induction is complete, you and the Course Director (*or tutor*) must sign the checklist. Take a copy of the checklist. Please send the signed completed checklist to Wendy Driscoll, Learning and Development, Chelmsford Office. A copy will be placed on your personal file.

Once you begin your operational role, you will need to complete a different induction checklist on your first day, end of first week and after three months (Appendix A of Induction Policy).

# APPENDIX B

## Activities to be signed off on your first week of train-

To be used by all new permanent clinical staff after starting first week of clinical training.

Induction Activity	Tick to confirm achieved & detail supporting evidence if appropriate	If you have not achieved it, how will you achieve it and by when?
<b>ORIENTATION</b>		
Orientation to the Training Centre facilities		
ID badge issued, uniform ordered.		
Car parking, catering, rest area and cloakroom/toilet facilities		
Introduction to colleagues and the Training staff		
<b>INFORMATION AND POLICIES</b>		
Confirm what to do if sick during training period		
Confirm hours of training		
<b>Policies and Procedures</b> <ul style="list-style-type: none"> <li>• Made aware of all Trust policies and procedures and have either been given copies/or understand how to access them</li> </ul>		
Explanation of first aid procedure		
<b>HEALTH AND SAFETY</b>		
<b>Fire safety procedures and assembly points</b> <ul style="list-style-type: none"> <li>• Causes of fire</li> <li>• Fire exits</li> <li>• Fire equipment</li> <li>• Fire alarms</li> <li>• Assembly point</li> <li>• Evacuation procedures</li> </ul>		
<b>Moving and Handling procedures</b> <ul style="list-style-type: none"> <li>• Equipment</li> <li>• Procedures</li> <li>• Lifting and Handling regulations</li> </ul>		
<b>Data Protection, Freedom of Information and Caldicott</b>		
<b>Confidentiality &amp; conduct</b> ensuring all verbal, written & electronic information is kept and used safely		

# APPENDIX B

To be used by all new permanent clinical staff after starting first week of clinical training.

Induction Activity	Tick to confirm achieved & detail supporting evidence if appropriate	If you have not achieved it, how will you achieve it and by when?
<b>HEALTH AND SAFETY</b> <i>continued</i>		
<b>Incident Reporting procedures</b> <ul style="list-style-type: none"> <li>• Nearest first aid rep</li> <li>• Location of incident forms</li> <li>• How to complete form</li> <li>• Reporting arrangements</li> </ul>		
Health and Safety procedures		
<b>OTHER</b>		
The content of the Training programme		
How to access sources of staff help/advice/tutorials/counselling arrangements/		
Needlestick/sharps		
Use of trust intranet/internet and email system & how to access helpdesk		
Postal system		
Photocopying		
Dress code		
<b>Other role/venue specific induction</b>  Please detail activities undertaken.  Continue on separate page if required		

### Completion of First Day induction

Signed by employee as complete

Signed by Course Director/tutor as completed

.....  
Date

.....  
Date

# APPENDIX B

## Induction Activities to be completed by new clinical staff

Induction Activity	Tick to confirm achieved ( <i>detail supporting evidence if appropriate</i> ). If not achieved, how and by when?	If you have not achieved it, how will you achieve it and by when?
<b>TRAINING AND DEVELOPMENT</b>		
Issued KSF job profile ( <i>if available</i> ).		
<b>HEALTH AND SAFETY</b>		
Explanation of key equipment used and identification of any training requirements		
Specific duties of role		
<b>OTHER</b>		
NHS Records management		
<b>OPTIONAL</b> NHS Core Learning Unit  Register to access online course <a href="http://www.corelearningunit.com/training">www.corelearningunit.com/training</a> • Basic IT skills European computer driving licence		
<b>OPTIONAL</b> Visited HEOC		
<b>Other specific induction activities</b> Please continue on separate page if necessary		

**Both parties please sign once the entire induction checklist completed.**

Now photocopy all pages of the checklist and send to Wendy Driscoll, Learning and Development Unit, Chelmsford HQ. Make sure you keep a copy.

I confirm I have received a full induction as described in the checklist.	
Staff member's name	.....
Staff signature	.....

I confirm that the person named above has satisfactorily completed their Induction programme as described in the checklist. If incomplete please include exceptions with action plan.	
Course Director/tutor's name	.....
Course Director/tutor's signature	.....
Date corporate induction completed	.....
Date local induction completed	.....

# APPENDIX C

Local Induction Checklist (agency and temporary workers only)

Name of Agency/temporary worker:	
Agency name:	
Job title:	
Department/Station/Base:	
Directorate:	
Employment Start Date:	
Name of employing manager:	

You and the employing manager should use the attached checklist (pages 22-24) to help you complete your local induction. This checklist is to ensure all aspects of your induction are covered in a timely and effective manner. Only sign the information when you feel the information has been adequately covered. If an item doesn't apply to your post, please mark N.A. The checklist is not exhaustive, it should be personalised according to the requirements of the role and individual. If you feel any area has been missed, please bring it to the attention of the manager employing you and detail what you have completed in the last section of the checklist "Other Role Specific Induction." You need to aim to complete your induction on your first day of starting your placement with us.

Once the induction is complete, you and your employing manager (or equivalent) must sign the checklist. Take a copy of the checklist. Please send the signed completed checklist to Wendy Driscoll, Learning and Development Unit, Chelmsford Office.

Name of Agency/temporary worker:	
Agency name:	
Job title:	
Department/Station/Base:	
Directorate:	
Employment Start Date:	
Name of employing manager:	

You and the employing manager should use the attached checklist (pages ) to help you complete your local induction. This checklist is to ensure all aspects of your induction are covered in a timely and effective manner. Only sign the information when you feel the information has been adequately covered. If an item doesn't apply to your post, please mark N.A. The checklist is not exhaustive, it should be personalised according to the requirements of the role and individual. If you feel any area has been missed, please bring it to the attention of the manager employing you and detail what you have completed in the last section of the checklist "Other Role Specific Induction." You need to aim to complete your induction on your first day of starting your placement with us.

Once the induction is complete, you and your employing manager (or equivalent) must sign the

# APPENDIX C

Induction Activities to be completed by all new agency/temporary workers on first day of employment  
*\*if appropriate to the role\**

Induction Activity	Tick to confirm achieved ( <i>detail supporting evidence if appropriate</i> ). If not achieved, how and by when?	If you have not achieved it, how will you achieve it and by when?
<b>Orientation</b>		
Confirm identity		
Confirm an emergency contact telephone number		
Orientation to the department/station/office and other areas of the organisation relevant to the post		
Local security arrangements, ID badge, key*, access codes* issued		
Car parking, catering and washroom facilities		
Explain the function and structure of department/station/office		
On call/bleep arrangements*		
Introduction to key individuals with the department/station/office		
Confirm hours of work and shift patterns if applicable		
First aid procedure		
<b>HEALTH AND SAFETY</b>		
<b>Fire safety procedures and assembly points</b> <ul style="list-style-type: none"> <li>● Fire exits</li> <li>● Fire equipment</li> <li>● Fire alarms</li> <li>● Emergency telephone numbers</li> <li>● Evacuation procedures</li> </ul>		

# APPENDIX C

Induction Activities to be completed by all new agency/temporary workers on first day of employ-

Induction Activity	Tick to confirm achieved ( <i>detail supporting evidence if appropriate</i> ). If not achieved, how and by when?	If you have not achieved it, how will you achieve it and by when?
<b>HEALTH AND SAFETY</b> <i>continued</i>		
<b>Moving and Handling procedures</b> <ul style="list-style-type: none"> <li>• Equipment</li> <li>• Procedures</li> <li>• Lifting and Handling regulations</li> </ul>		
<b>Incident Reporting procedures</b> <ul style="list-style-type: none"> <li>• Location of incident forms</li> <li>• How to complete form</li> <li>• Reporting arrangements</li> </ul>		
<b>Health and Safety procedures</b> <ul style="list-style-type: none"> <li>• Security</li> <li>• Waste disposal</li> <li>• VDU regulations</li> </ul>		
<b>Other role specific induction</b> Please list activities, continuing on separate page if necessary		

Complete once the entire Induction Checklist completed.

I confirm I have received a full induction as described in the checklist.

Agency worker's name .....

Agency worker's signature .....

Date .....

I confirm that the person named above has satisfactorily completed their Induction programme as described in the checklist. If incomplete please include exceptions with action plan.

Line manager's name .....

Line manager's signature .....

Date .....

Now photocopy all pages of the checklist and send to Wendy Driscoll, Learning and Development Unit, Chelmsford HQ. Make sure you keep a copy.



# Equality analysis

**Title:** Induction Procedure

**What are the intended outcomes of this work?** *Include outline of objectives and function aims*  
To provide a robust procedure around the onboarding of new staff

**Who will be affected?** *e.g. staff, patients, service users, general population etc*  
All staff

**Evidence** *The Government's commitment to transparency requires public bodies to be open about the information on which they base their decisions and the results.*<sup>1</sup>

**What evidence have you considered?** *List the main sources of data, research and other sources of evidence (including full references) reviewed to determine impact on each equality group (protected characteristic). This can include national research, surveys, reports, research interviews, focus groups, pilot activity evaluations etc. If there are gaps in evidence, state what you will do to close them in the Action Plan on the last page of this template.*  
NHSLA induction standards

**Disability** *Consider and detail (including the source of any evidence) on attitudinal, physical and social barriers this may include safeguarding adults*<sup>2</sup>  
None

**Gender** *Consider and detail (including the source of any evidence) on men and women*  
None

**Race** *Consider and detail (including the source of any evidence) on difference ethnic groups, nationalities, including travellers and language barriers.*  
None

**Age** *Consider and detail (including the source of any evidence) across age ranges on old and younger people. This can include safeguarding*<sup>3</sup>, *consent and child welfare.*  
None

**Gender reassignment (including transgender)** *Consider and detail (including the source of any evidence) on transgender and transsexual people. This can include issues such as privacy of data and harassment.*  
None

**Sexual orientation** *Consider and detail (including the source of any evidence) on heterosexual people as well as lesbian, gay and bi-sexual people.*  
None

<sup>1</sup> [EEAS Being Open Policy](#)

<sup>2</sup> [EEAS Safeguarding Vulnerable Adults Policy](#)

<sup>3</sup> [Safeguarding Children & Young People Policy.pdf](#)

<p><b>Religion or belief</b> Consider and detail (including the source of any evidence) on people with different religions, beliefs or no belief. None</p>
<p><b>Pregnancy and maternity</b> Consider and detail (including the source of any evidence) on working arrangements, part-time working, infant caring responsibilities.<sup>4</sup> None</p>
<p><b>Carers</b> Consider and detail (including the source of any evidence) on part-time working, shift-patterns, general caring responsibilities. None</p>
<p><b>Other identified groups</b> Consider and detail and include the source of any evidence on different socio-economic groups, area inequality, income, resident status (migrants) and other groups experiencing disadvantage and barriers to access. None</p>

<p><b>Engagement and involvement</b> Was this work subject to the requirements for public engagement/consultation? The document was sent to key stakeholders involved in the induction procedure for comment</p>
<p>How have you engaged stakeholders in gathering evidence or testing the evidence available? N/A</p>
<p>How have you engaged stakeholders in testing the policy/strategy or programme proposals? N/A</p>
<p>For each engagement activity, please state who was involved, how and when they were engaged, and the key outputs:</p>

<p><b>Summary of Analysis</b> Considering the evidence and engagement activity you listed above, please summarise the impact of your work. Consider whether the evidence shows potential for differential impact, if so state whether adverse or positive and for which groups. How you will mitigate any negative impacts. How you will include certain protected groups in services or expand their participation in public life.</p> <p>Now consider and detail below how the proposals impact on elimination of discrimination, harassment and victimisation, advance the equality of opportunity and promote good relations between groups.</p>
<p><b>Eliminate discrimination, harassment and victimisation</b> Where there is evidence, address each protected characteristic (age, disability, gender, gender reassignment, pregnancy and maternity, race, religion or belief, sexual orientation). The procedure mandates the requirement for all staff to complete induction</p>
<p><b>Advance equality of opportunity</b> Where there is evidence, address each protected characteristic (age, disability, gender, gender reassignment, pregnancy and maternity, race, religion or belief, sexual orientation). N/A</p>
<p><b>Promote good relations between groups</b> Where there is evidence, address each protected characteristic</p>

<sup>4</sup> [Pregnancy & Maternity Policy](#)

(age, disability, gender, gender reassignment, pregnancy and maternity, race, religion or belief, sexual orientation).

N/A

**What is the overall impact?** Consider whether there are different levels of access experienced, needs or experiences, whether there are barriers to engagement, are there regional variations and what is the combined impact?

No negative impact is recognised from this procedure

**Addressing the impact on equalities** Please give an outline of what broad action you or any other bodies are taking to address any inequalities identified through the evidence.

**Action planning for improvement** Please give an outline of the key actions based on any gaps, challenges and opportunities you have identified. Actions to improve the policy/programmes need to be summarised (An action plan template is appended for specific action planning). Include here any general action to address specific equality issues and data gaps that need to be addressed through consultation or further research.

None required as the procedure follows NHSLA standards required

Please give an outline of your next steps based on the challenges and opportunities you have identified. Include here any or all of the following, based on your assessment

- Plans already under way or in development to address the **challenges** and **priorities** identified.
- Arrangements for continued engagement of stakeholders.
- Arrangements for continued monitoring and evaluating the policy for its impact on different groups as the policy is implemented (or pilot activity progresses)
- Arrangements for embedding findings of the assessment within the wider system
- Arrangements for publishing the assessment and ensuring relevant colleagues are informed of the results
- Arrangements for making information accessible to staff, patients, service users and the public
- Arrangements to make sure the assessment contributes to reviews of EEAS strategic equality objectives.

### For the record

**Name of person who carried out this assessment:**

Harri Paddan

**Date assessment completed:**

05.09.13

**Name of responsible Director:**

Francesca Okosi

**Date assessment was signed:**

# Equality analysis

**Title:** Induction Procedure

**What are the intended outcomes of this work?** *Include outline of objectives and function aims*

To provide a robust procedure around the onboarding of new staff

**Who will be affected?** *e.g. staff, patients, service users, general population etc*

All staff

**Evidence** *The Government's commitment to transparency requires public bodies to be open about the information on which they base their decisions and the results.*<sup>5</sup>

**What evidence have you considered?** *List the main sources of data, research and other sources of evidence (including full references) reviewed to determine impact on each equality group (protected characteristic). This can include national research, surveys, reports, research interviews, focus groups, pilot activity evaluations etc. If there are gaps in evidence, state what you will do to close them in the Action Plan on the last page of this template.*

NHSLA induction standards

**Disability** *Consider and detail (including the source of any evidence) on attitudinal, physical and social barriers this may include safeguarding adults*<sup>6</sup>

None

**Gender** *Consider and detail (including the source of any evidence) on men and women*

<sup>5</sup> [EEAS Being Open Policy](#)

<sup>6</sup> [EEAS Safeguarding Vulnerable Adults Policy](#)

None
<b>Race</b> Consider and detail (including the source of any evidence) on difference ethnic groups, nationalities, including travellers and language barriers. None
<b>Age</b> Consider and detail (including the source of any evidence) across age ranges on old and younger people. This can include safeguarding <sup>7</sup> , consent and child welfare. None
<b>Gender reassignment (including transgender)</b> Consider and detail (including the source of any evidence) on transgender and transsexual people. This can include issues such as privacy of data and harassment. None
<b>Sexual orientation</b> Consider and detail (including the source of any evidence) on heterosexual people as well as lesbian, gay and bi-sexual people. None
<b>Religion or belief</b> Consider and detail (including the source of any evidence) on people with different religions, beliefs or no belief. None
<b>Pregnancy and maternity</b> Consider and detail (including the source of any evidence) on working arrangements, part-time working, infant caring responsibilities. <sup>8</sup> None
<b>Carers</b> Consider and detail (including the source of any evidence) on part-time working, shift-patterns, general caring responsibilities. None

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<sup>7</sup> [Safeguarding Children & Young People Policy.pdf](#)

<sup>8</sup> [Pregnancy & Maternity Policy](#)

<p><b>Other identified groups</b> Consider and detail and include the source of any evidence on different socio-economic groups, area inequality, income, resident status (migrants) and other groups experiencing disadvantage and barriers to access.</p> <p>None</p>

<p><b>Engagement and involvement</b>  <i>Was this work subject to the requirements for public engagement/consultation?</i></p> <p>The document was sent to key stakeholders involved in the induction procedure for comment</p>
<p><i>How have you engaged stakeholders in gathering evidence or testing the evidence available?</i></p> <p>N/A</p>
<p><i>How have you engaged stakeholders in testing the policy/strategy or programme proposals?</i></p> <p>N/A</p>
<p><i>For each engagement activity, please state who was involved, how and when they were engaged, and the key outputs:</i></p>

<p><b>Summary of Analysis</b> <i>Considering the evidence and engagement activity you listed above, please summarise the impact of your work. Consider whether the evidence shows potential for differential impact, if so state whether adverse or positive and for which groups. How you will mitigate any negative impacts. How you will include certain protected groups in services or expand their participation in public life.</i></p> <p><i>Now consider and detail below how the proposals impact on elimination of discrimination, harassment and victimisation, advance the equality of opportunity and promote good relations between groups.</i></p>
<p><b>Eliminate discrimination, harassment and victimisation</b> <i>Where there is evidence, address each protected characteristic (age, disability, gender, gender reassignment, pregnancy and maternity, race, religion or belief, sexual orientation).</i></p> <p>The procedure mandates the requirement for all staff to complete induction</p>

**Advance equality of opportunity** Where there is evidence, address each protected characteristic (age, disability, gender, gender reassignment, pregnancy and maternity, race, religion or belief, sexual orientation).

N/A

**Promote good relations between groups** Where there is evidence, address each protected characteristic (age, disability, gender, gender reassignment, pregnancy and maternity, race, religion or belief, sexual orientation).

N/A

**What is the overall impact?** Consider whether there are different levels of access experienced, needs or experiences, whether there are barriers to engagement, are there regional variations and what is the combined impact?

No negative impact is recognised from this procedure

**Addressing the impact on equalities** Please give an outline of what broad action you or any other bodies are taking to address any inequalities identified through the evidence.

**Action planning for improvement** Please give an outline of the key actions based on any gaps, challenges and opportunities you have identified. Actions to improve the policy/programmes need to be summarised (An action plan template is appended for specific action planning). Include here any general action to address specific equality issues and data gaps that need to be addressed through consultation or further research.

None required as the procedure follows NHSLA standards required

Please give an outline of your next steps based on the challenges and opportunities you have identified. Include here any or all of the following, based on your assessment

- Plans already under way or in development to address the **challenges** and **priorities** identified.
- Arrangements for continued engagement of stakeholders.
- Arrangements for continued monitoring and evaluating the policy for its impact on different groups as the policy is implemented (or pilot activity progresses)
- Arrangements for embedding findings of the assessment within the wider system
- Arrangements for publishing the assessment and ensuring relevant colleagues are informed of the results
- Arrangements for making information accessible to staff, patients, service users and the public

- Arrangements to make sure the assessment contributes to reviews of EEAS strategic equality objectives.

**For the record**

**Name of person who carried out this assessment:**

Harri Paddan

**Date assessment completed:**

05.09.13

**Name of responsible Director:**

Francesca Okosi

**Date assessment was signed:**

Under Review